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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/589,449	06/07/2000	Arda Akman	12096RNUS01U	9103

27820 7590 08/06/2003

WITHROW & TERRANOVA, P.L.L.C.
P.O. BOX 1287
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EXAMINER

PARTON, KEVIN S

ART UNIT PAPER NUMBER //

2153

DATE MAILED: 08/06/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary

Application No.

09/589,449

Applicant(s)

AKMAN, ARDA

Examiner

Kevin Parton

Art Unit

2153

All participants (applicant, applicant's representative, PTO personnel):

(1) Kevin Parton.

(3) _____.

(2) Benjamin Withrow.

(4) _____.

Date of Interview: 05 August 2003.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.

If Yes, brief description: _____.

Claim(s) discussed: N/A.

Identification of prior art discussed: N/A.

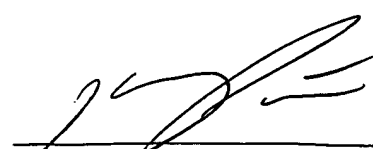
Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☒ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The applicant's representative was notified that the After Final request for reconsideration was received and a response is forthcoming.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.


Examiner's signature, if required